

ZILKA · KOTAB
P C
ZILKA, KOTAB & FEECE™

RECEIVED
CENTRAL FAX CENTER
JAN 06 2005

95 SOUTH MARKET ST., SUITE 420
SAN JOSE, CA 95113

TELEPHONE (408) 971-2573
FAX (408) 971-4660

FAX COVER SHEET

Date:	January 6, 2005	Phone Number	Fax Number
To:	Examiner Woo H. CHOI	(703) 872-9306	
From:	Kevin J. Zilka		

Docket No.: NVIDP033A/P000873

App. No.: 10/657,957

Total Number of Pages Being Transmitted, Including Cover Sheet: 17

Message:

Please deliver to Examiner CHOI.

Thank you,
Kevin J. Zilka

Original to follow Via Regular Mail *Original will Not be Sent* *Original will follow Via Overnight Courier*

The information contained in this facsimile message is attorney privileged and confidential information intended only for the use of the individual or entity named above. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution or copy of this communication is strictly prohibited. If you have received this communication in error, please immediately notify us by telephone (if long distance, please call collect) and return the original message to us at the above address via the U.S. Postal Service. Thank you.

IF YOU DO NOT RECEIVE ALL PAGES OR IF YOU ENCOUNTER
ANY OTHER DIFFICULTY, PLEASE PHONE Erica
AT (408) 971-2573 AT YOUR EARLIEST CONVENIENCE

January 6, 2005

Incomplete pages 9-17 missing

RECEIVED
CENTRAL FAX CENTER

JAN 06 2005

-1-

PATENT

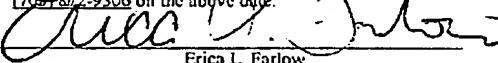
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of)	
)	
Van Dyke et al.)	Group Art Unit: 2186
)	
Application No.: 10/657,957)	Examiner: Choi, Woo H.
)	
Filed: 09/08/03)	Docket No.
)	
For: SYSTEM AND METHOD FOR A)	
HIGH BANDWIDTH-LOW LATENCY)	
<u>MEMORY CONTROLLER</u>)	
		Date: January 6, 2005

CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents, Alexandria, VA 22313-1450 attn: Examiner Choi at facsimile number: (703) 872-9306 on the above date.

Signed:


Erica L. Farlow

AMENDMENT B

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to an Office Action mailed 11/12/04, please enter the following in the above application:

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:) Attorney Docket No.: NVIDP033A_P000873
 Van Dyke et al.) Examiner: Choi, Woo H.
 Application No.: 10/657,957) Group Art Unit: 2186
 Filed: 09/08/03) Date: January 6, 2005
 For: SYSTEM AND METHOD FOR A HIGH)
 BANDWIDTH-LOW LATENCY MEMORY)
 CONTROLLER)

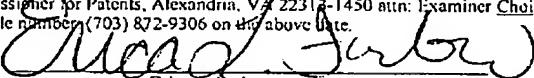
RECEIVED
CENTRAL FAX CENTER

JAN 06 2005

CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents, Alexandria, VA 22313-1450 attn: Examiner Choi at facsimile number (703) 872-9306 on the above date.

Signed:



Erica L. Farlow

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims Remaining After Amendment	Highest Previously Paid For Extra	Present	SMALL ENTITY RATE FEE	OR	LARGE ENTITY RATE FEE	
TOTAL CLAIMS	<u>37</u>	<u>-</u>	<u>27</u>	<u>- 10</u>	X25 = \$	OR	X 50 = \$500
INDEP CLAIMS	<u>04</u>	<u>-</u>	<u>04</u>	<u>- 00</u>	X100 = \$	OR	X 200 = \$0
[] Multiple Dependent Claim Present and Fee Not Previously Paid				\$0		\$0	
				TOTAL	\$	\$ 500.00	



Applicant(s) hereby petition for a month extension of time to respond to the outstanding Office Action. Applicant(s) believe that no Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-1351.



Enclosed is our Check No. in the amount of \$ to cover the additional claim fee and/or extension of time fees. If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-1531 (Order No. NVIDP033A_P000873) A copy of this sheet is enclosed for billing purposes.

Respectfully submitted,
Zilka-Korab, PC
Kevin J. Zilka
Registration No. 41,429

P.O. Box 721120
San Jose, CA 95172-1120
Telephone: (408) 971-2573

(Revised 1/96)

PATENT

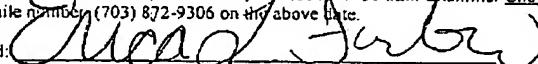
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:) Attorney Docket No.: NVIDP033A_P000873
 Van Dyke et al.)
) Examiner: Choi, Woo H.
 Application No.: 10/657,957)
) Group Art Unit: 2186
 Filed: 09/08/03)
) Date: January 6, 2005
 For: SYSTEM AND METHOD FOR A HIGH)
 BANDWIDTH-LOW LATENCY MEMORY)
 CONTROLLER)

 COPY

CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents, Alexandria, VA 22313-1450 atm: Examiner Choi at facsimile number (703) 872-9306 on the above date.

Signed: 
 Erica L. Farlow

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims Remaining After Amendment	Highest Previously Paid For Extra	Present	SMALL ENTITY RATE FEE	OR	LARGE ENTITY RATE FEE
TOTAL CLAIMS	37 -	27	10	X25 = \$	OR	X 50 = \$500
INDEP CLAIMS	04 -	04	00	X100 = \$	OR	X 200 = \$0
[] Multiple Dependent Claim Present and Fee Not Previously Paid				\$0		\$0
				TOTAL	\$ _____	\$ 500.00

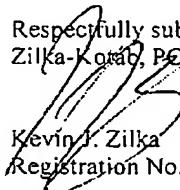


Applicant(s) hereby petition for a month extension of time to respond to the outstanding Office Action.
 Applicant(s) believe that no Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-1351.



Enclosed is our Check No. in the amount of \$ to cover the additional claim fee and/or extension of time fees.
 If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-1351 (Order No. NVIDP033A_P000873) A copy of this sheet is enclosed for billing purposes.

Respectfully submitted,
 Zilka-Kotab, PC


 Kevin J. Zilka
 Registration No. 41,429

P.O. Box 721120
 San Jose, CA 95172-1120
 Telephone: (408) 971-2573

(Revised 10/04)